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**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/531,064
Filing Date	May 19, 2005
First Named Inventor	Daniel Baglione
Art Unit	3749
Examiner Name	
Attorney Docket Number	VA30408

**I hereby revoke all previous powers of attorney given in the above-identified application.**

☐ A Power of Attorney is submitted herewith.

**OR**

☒ I hereby appoint the practitioners associated with the Customer Number: 00226

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with  
Customer Number:

00226

**OR**

☐ Firm or  
Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)*

**SIGNATURE of Applicant or Assignee of Record**

Signature

Name

Timothy J. Olson, Attorney-in-Fact, ALSTOM (Switzerland) Ltd

Date

September 22, 2006

Telephone

(860) 285-2839

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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# PCT

## GENERAL POWER OF ATTORNEY

(for several international applications filed under the Patent Cooperation Treaty)

(PCTRule90.5)

The undersigned person(s):

(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

ALSTOM (Switzerland) Ltd  
Brown Boveri Strasse 7  
5401 Baden  
Switzerland

hereby appoint(s) the following person as:

☒ agent

☐ common representative

**Name and address**

(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

Timothy J. Olson  
ALSTOM Power Inc.  
Patent Services  
2000 Day Hill Road  
Windsor, Connecticut 06095  
US

to represent the undersigned before

☒ all the competent International Authorities

☐ the International Searching Authority only

☐ the International Preliminary Examining Authority only

in connection with any and all international applications filed by the undersigned with the following Office

\_\_\_\_\_ as receiving Office  
and to make or receive payments on behalf of the undersigned.

**Signature(s)** (where there are several persons, each of them must sign; next to each signature, indicate the name of the person signing and the capacity in which the person signs, if such capacity is not obvious from reading this power);

G. Bolli  
Giacomo F. Bolis  
Director Intellectual Property

Date: January 18, 2006